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Legislative Resource Center	Office of Public Records
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Washington, DC 20515	Washington, DC 20510

SECRETARY OF THE SE
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐ 1. Effective Date of Registration 5/1/2004

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name The SPECTRUM Group

Address 11 Canal Center Plaza, Suite 103

City Alexandria State VA Zip 22314

4. Principal place of business (if different from line 3)
City State/Zip (or Country)

5. Telephone number and contact name
(703) 683-4222 Contact Rebecca LeFevre E-mail (optional)

6. General description of registrant's business or activities
Consulting Firm

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should che
labeled "Self" and proceed to line 10. ☐ *Self*

7. Client name MD Helicopters

Address 4555 East McDowell Rd.

City Mesa State AZ Zip 85215-9734

8. Principal place of business (if different from line 7)
City State/Zip (or Country)

9. General description of client's business or activities
Manufacture of helicopters

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any in this section has served as a "covered executive branch official" or "covered legislative branch official" within two acting as a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name	Covered Official Position (if applicable)
John Conaway	
Gus Cianciolo	
Wayne Tingle	
Greg Sharp	

Registrant Name The SPECTRUM Group Client Name MD Helicopters

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1,

DEF

12. Specific lobbying issues (current and anticipated)

S. 1050, H.R. 1588, H.R.2658

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than $10,000 to the lobbying activities of the regi a semiannual period **and** in whole or in major part plans, supervises or controls the registrant's lobbying activi

☑ No ➪ Go to line 14. ☐ Yes ⇩ Complete the rest of this section for each entity matchi criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or coun

FOREIGN ENTITIES

14. Is there any foreign entity that:

a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **or**
b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subs activities of the client or any organization identified on line 13; **or**
c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the o of the lobbying activity?

☑ No ➪ Sign and date the registration.

☐ Yes ⇩ Complete the rest of this section for ea matching the criteria above, then sign registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Geo Khan Date 8/13/04

Printed Name and Title Greg Sharp, President

Form LD-1 (Rev. 04/03)